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PTO/SB/21 (09-04)

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(to be used for all correspondence after initial filing)				Examiner Name	George Bu	199							
Total Number of Pages in This Submission 34				Attorney Docket Number ARC-14970-1			1						
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Appl. No.

10/789,049

Confirmation No.

:8333

Applicant

Liljana Spirkovska

Examiner

George Bugg

Filed

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1. BASIC FILING, SEAR	CH, AND E	XAMINATION FEI	ES		.							
Application Type	FILING F Sr Fee (\$)	mall Entity		Small Entity	461	Entity	Fees Paid (\$)					
Utility	300		00		00 10							
Design	200	100 1	00	50 13	30 6	55 <u> </u>						
Plant	200	100 3	00	150 16	50 8	30 _						
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Provisional	200	100	0	0	0	0 _						
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Total Claims Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Total Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Total Claims Fee (\$) Fee Paid (\$) Total Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Total Claims Fee (\$) Fee Paid (\$)												
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